

✓ O.K. 1-19-17

CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN		CITY OF FITCHBURG JAN 18 2017 RECEIVED OFFICE USE ONLY
Is This Report an Amendment: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Instructions for completing schedules are on the back of each schedule.		
COMMITTEE IDENTIFICATION		
Name of Committee FRIENDS OF WANDA SMITH		
Street Address P.O.BOX 45362		
City, State and Zip Code MADISON, WI. 53744		

Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT	
<input checked="" type="checkbox"/> January Continuing _____ <input type="checkbox"/> July Continuing _____ <input type="checkbox"/> September Continuing _____	<input type="checkbox"/> Pre-Primary _____ <input type="checkbox"/> Pre-Election _____ <input type="checkbox"/> Spring _____ <input type="checkbox"/> Fall _____ <input type="checkbox"/> Special _____ <input type="checkbox"/> Termination Report also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$ 488.14 ✓	\$ 488.14 ✓
1B. Contributions from Committees (Transfers-In)	\$ 0.00	\$ 0.00
1C. Other Income and Commercial Loans	\$ 0.00	\$ 0.00
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 488.14 ✓	\$ 488.14 ✓
2. DISBURSEMENTS		
2A. Gross Expenditures	\$ 0.00	\$ 0.00
2B. Contributions to Committees (Transfers-Out)	\$ 0.00	\$ 0.00
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	\$

CASH SUMMARY	
Cash Balance Beginning of Report	\$ 0
Total Receipts	\$ 488.14
Subtotal	\$ 488.14
Total Disbursements	\$ 0
CASH BALANCE END OF REPORT	\$ 488.14
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$
LOANS (Balance at the Close of This Period-3B)	\$ 351.14

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer WANDA SMITH	Signature of Candidate or Treasurer <i>Kelly Shumato</i> Date: 1. 15.2017 Email: cleeb710@yahoo.com Daytime Phone: 312-618-5855
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NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.

Complete Committee Name

FRIENDS OF WANDA SMITH

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
12.22.16	JAKE JOHNSON 2617 TARGHEE STREET FITCHBURG WI. 53711 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$50.00	\$50.00
12.22.16	SUE CHASE 5305 CONEY WESTON PLACE MADISON, WI. 53711 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$25.00	\$25.00
12.22.16	DOROTHY KRAUSE 2105 APACHE DRIVE FITCHBURG WI. 53711 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$20.00	\$20.00
12.22.16	KELLEY SHUMATE 5451 WILLIAMSBURGWAY #305 FITCHBURG WI. 53711 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$2.00	\$2.00
12.27.16	AMELIA ROYKO MAURER 509 S. Baldwin St. #1 Madison, WI 53703 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$20.00	\$20.00
12.28.16	MARILYN RUFFIN 1555 WILD IRIS STREET SUN PRAIRIE, WI. 53590 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$20.00	\$20.00
12.22.16	WANDA SMITH 5666 KING JAMES COURT APT 4 FITCHBURG, WI. 53719 Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____		\$257.87	\$257.87
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 394.87	394.87
TOTAL ITEMIZED CONTRIBUTIONS			\$ 0.00	0.00
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			\$ 0.00	0.00
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$ 394.87	394.87

SCHEDULE 1-A

RECEIPTS

Contributions (Including Loans) From Individuals

Page 2 of 2

Complete Committee Name

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Contributor	Occupation (if year-to-date total exceeds \$200)	Amount of Contribution	Y-T-D Total
12.22.2016	MARY RATHBUN 197 SHATO LANE MONONA, WI. 53716		93.27	93.27
	Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
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	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit – Ethics ID# _____			
SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE			\$ 93.27	93.27
TOTAL ITEMIZED CONTRIBUTIONS			\$ 0.00	0.00
TOTAL ANONYMOUS CONTRIBUTIONS \$10 OR LESS			\$ 0.00	0.00
TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS			\$ 93.27	93.27

SCHEDULE 3-B

Loans
Individual, Committee or Commercial
ADDITIONAL DISCLOSURE

Page 1 of 1

Complete Committee Name

FRIENDS OF WANDA SMITH

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
12/22/2016	WANDA SMITH 5666 KING JAMES COURT APT. 4 FITCHBURG, WI. 53719	0.00	257.87		257.87

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
12/ 22 /2016	MARY RATHBUN 197 SHATO LANE MONONA, WI. 53716	0.00	93.27		93.27

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

Date	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period
/ /					

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Amount Guaranteed Outstanding \$

SUBTOTAL OUTSTANDING LOANS THIS PAGE \$ 351.14

TOTAL OUTSTANDING LOANS \$ 351.14